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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF WISCONSIN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Kim	
	your government-issued picture identification (for example, your driver's license or passport).	First name	First name
		Leigh	
		Middle name	Middle name
	Bring your picture identification to your	Messick	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any		
	assumed, trade names and doing business as names.	Kim Westerfield	
	Do NOT list the name of		
	any separate legal entity such as a corporation,		
	partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security		
	number or federal	xxx-xx-4992	
	Individual Taxpayer Identification number (ITIN)		
	·····		

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Debtor 1 Kim Leigh Messick

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Your Employer Identification Number (EIN), if any.				
	(Liv), ii aliy.	EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		W8234 St Croix Trail Road Minong, WI 54849			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Washburn			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
٠.	this district to file for	GNOON GNO.	onour one.		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Kim Leigh Messick

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Case number (if known) Debtor 1 Kim Leigh Messick Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure Bankruptcy Code, and are you a small business in 11 U.S.C. § 1116(1)(B). debtor? For a definition of small I am not filing under Chapter 11. No. business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. Code. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Kim Leigh Messick

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Kim Leigh Messic	K			Case number (i	t known)
Par	t 6: Answer These Questi	ions for Rep	orting Purposes			
16.	What kind of debts do you have?		re your debts primarily consu dividual primarily for a personal,			d in 11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
			Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.			
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. S	tate the type of debts you owe th	hat are not consum	ner debts or business o	debts
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. G	to to line 18.		
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do yo re paid that funds will be availab			y is excluded and administrative expenses
	administrative expenses		No			
	are paid that funds will be available for distribution to unsecured creditors?	C	l Yes			
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		☐ 25,001-50,000
		50-99		5001-10,000		5 0,001-100,000
		□ 100-199 □ 200-999		□ 10,001-25,00	00	☐ More than100,000
19.	How much do you estimate your assets to	\$0 - \$50		□ \$1,000,001 - □ \$10,000,001		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion
	be worth?	□ \$50,001 □ \$100.001	- \$100,000 1 - \$500,000	□ \$10,000,001 □ \$50,000,001		□ \$10,000,000,001 - \$10 billion
			1 - \$1 million	□ \$100,000,00°		☐ More than \$50 billion
20.	How much do you estimate your liabilities	\$0 - \$50		\$1,000,001 -		□ \$500,000,001 - \$1 billion
	to be?	\$50,001		□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
		_	1 - \$500,000 1 - \$1 million	□ \$100,000,00°		☐ More than \$50 billion
Par	7: Sign Below					
For	you	I have exam	nined this petition, and I declare	under penalty of p	erjury that the informat	tion provided is true and correct.
			osen to file under Chapter 7, I and es Code. I understand the relief a			nder Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.
			y represents me and I did not pa have obtained and read the not			n attorney to help me fill out this
		I request re	ief in accordance with the chapt	er of title 11, Unite	d States Code, specifi	ed in this petition.
		bankruptcy and 3571.				roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Kim Leigh Signature o	Messick		Signature of Debtor 2	
		Executed or	February 10, 2025		Executed on	
			MM / DD / YYYY		MM / E	DD / YYYY

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Debtor 1 Kim Leigh Messick Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Matthew C Lein	Date	February 10, 2025	
Signature of Attorney for Debtor		MM / DD / YYYY	
Matthew C Lein			
Printed name			
Lein Law Offices, LLP			
Firm name			
P.O. Box 761			
15692 Hwy 63 North			
Hayward, WI 54843			
Number, Street, City, State & ZIP Code			
Contact phone 715-634-4273	Email address		
1084028 WI			
Bar number & State			

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			<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kim Leigh Messio	ck		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF WISCONSIN	
Case number				
(if known)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	24,049.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	24,049.00
² ar	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	6,356.05
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	27,298.17
	Your total liabilities	\$	33,654.22
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,966.10
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,738.00
² ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	1	

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Kim Leigh Messick Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,360.10

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document	Page 10 of 83		
Fill in this infe	ormation to identify your case a	nd this filing:			
Debtor 1	Kim Leigh Messick				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the: WES	TERN DISTRICT OF WIS	SCONSIN		
C					–
Case number					☐ Check if this is an amended filing
					amended ming
<u>Official F</u>	<u>form 106A/B</u>				
Schedi	lle A/B: Propert	V			12/15
	, separately list and describe items		If an asset fits in more than one	category list the asset in	
	Be as complete and accurate as pe				
information. If m Answer every qu	nore space is needed, attach a sepai	rate sheet to this form. On	the top of any additional pages	, write your name and cas	e number (if known).
Aliswei every qu	destion.				
Part 1: Descri	be Each Residence, Building, Land,	or Other Real Estate You	Own or Have an Interest In		
1 Do you own	or have any legal or equitable intere	et in any residence, huildir	ng land or similar property?		
1. Do you own t	or nave any legal of equitable interes	st iii aily residence, buildii	ig, land, or similar property:		
No. Go to I	Part 2.				
☐ Yes. When	re is the property?				
Part 2: Descri	be Your Vehicles				
Do you own, l	ease, or have legal or equitable	interest in any vehicles	, whether they are registere	ed or not? Include any v	ehicles you own that
	drives. If you lease a vehicle, also				•
3 Cars. vans.	trucks, tractors, sport utility ve	hicles, motorcycles			
o. • • • • • • • • • • • • • • • • • • •					
☐ No					
Yes					
3.1 Make:	Ford	Who has an interest in	the property? Check one	Do not deduct secured c	
Model:	Edge	■ Debtor 1 only			ed claims on Schedule D: ims Secured by Property.
Year:	2016	Debtor 2 only		Current value of the	Current value of the
Approxir	nate mileage: 90000	Debtor 1 and Debtor	2 only	entire property?	portion you own?
Other inf	formation:	☐ At least one of the de	btors and another		
	e Plate:	_		\$10,075.00	¢40.075.00
Tag Ty		Check if this is com	munity property	\$10,075.00	\$10,075.00
	FMPK4K91GBB21944 of Origin: NC	(see instructions)			
	ate: 2/10/2022				
	ration Expiration:				
Engine	e Size: 122				
	4 Dr Wagon Sport Utility				
Owner					
Regist Lien H					
LIEH H	UIUCI.				

Debtor 1	Kim Leigh Mess	sick Cas	e number (if known)	
3.2 Make: Model:	Polaris ATV 549CC	Who has an interest in the property? Check one ■ Debtor 1 only	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Year:	2010	☐ Debtor 2 only	Current value of the	Current value of the
Approx	kimate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other i	information:	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$3,896.00	\$3,896.00
		nomes, ATVs and other recreational vehicles, other vehicles, and tors, personal watercraft, fishing vessels, snowmobiles, motorcycle ac		
■ No				
☐ Yes				
		portion you own for all of your entries from Part 2, including any or Part 2. Write that number here		\$13,971.00
Part 3: Desc	ribe Your Personal	and Household Items		
		l or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples □ No	d goods and furni E: Major appliances Describe	, furniture, linens, china, kitchenware		
	D	ishes		\$100.00
	U	tensils		\$100.00
		teriono		
	Si	ilverware		\$5.00
	S	mall Appliances		\$40.00
	P	ots and Pans		\$100.00
			<u> </u>	
	T.	ininguage Frankting		\$2,000.00
	LI	ivingroon Furniture		\$2,000.00
	D	ining room furniture		\$500.00
	<u> </u>	adra and Franciscop		<u></u>
	B	edroom Fruniture		\$2,000.00
	Si	moker		\$500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

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		urines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, cos, memorabilia, collectibles	oin, or baseball card collections;
	musical instrum ☐ No	aphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canon	es and kayaks; carpentry tools;
	Yes. Describe		
		Cross Bow	\$500.00
	Firearms Examples: Pistols, rifles, s No ☐ Yes. Describe	shotguns, ammunition, and related equipment	
	Clothes Examples: Everyday cloth No	es, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe		
	Ī.	Clothing	\$1,000.00
13.	■ No □ Yes. Describe Non-farm animals Examples: Dogs, cats, bir ■ No □ Yes. Describe	ds, horses nousehold items you did not already list, including any health aids you did not list	
	■ No □ Yes. Give specific inform		
15		all of your entries from Part 3, including any entries for pages you have attached mber here	\$6,845.00
Pa	rt 4: Describe Your Financia	I Assets	
Do	you own or have any leg	al or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	ve in your wallet, in your home, in a safe deposit box, and on hand when you file your pe	etition
		ngs, or other financial accounts; certificates of deposit; shares in credit unions, brokeragous have multiple accounts with the same institution, list each.	ge houses, and other similar
	■ Yes	Institution name:	

Official Form 106A/B Schedule A/B: Property page 3

Deb	tor 1 Kim Leigh	Messick		Case number (if known)	
		17.1.	Checking	St Employee Credit Union	\$300.00
		17.2.	Checking	Shell Lake State Bank	\$8.00
		17.3.	Savings	St Employee Credit Union	\$1,000.00
		17.4.	Checking	Shell Lake State Bank Jint with Joel Brandenberg	\$500.00
	Bonds, mutual funds Examples: Bond fund			okerage firms, money market accounts	
	No Yes		Institution or issuer	name:	
_	Non-publicly traded s joint venture	stock and	interests in incorp	orated and unincorporated businesses, including an interest in a	an LLC, partnership, and
	Yes. Give specific in		about them me of entity:	% of ownership:	
	Negotiable instrumen	ts include p	personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	Yes. Give specific in		about them uer name:		
_				403(b), thrift savings accounts, or other pension or profit-sharing plans	s
	No Yes. List each accou		tely. of account:	Institution name:	
	Examples: Agreemen	ed deposi	ts you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies,	or others
	No Yes			Institution name or individual:	
_	Annuities (A contract	for a perio	dic payment of mone	ey to you, either for life or for a number of years)	
		ssuer nam	ne and description.		
2	nterests in an educat 6 U.S.C. §§ 530(b)(1) I No			ualified ABLE program, or under a qualified state tuition progran	m.
		nstitution r	name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
_	Γrusts, equitable or f I Nο	uture inte	rests in property (o	other than anything listed in line 1), and rights or powers exercis	able for your benefit
	Yes. Give specific in	nformation	about them		
				nd other intellectual property eds from royalties and licensing agreements	

 $\hfill\square$ Yes. Give specific information about them...

Case 1-25-10269-cif Doc 1 Filed 02/10/25 Entered 02/10/25 12:12:07 Page 14 of 83 Document Case number (if known) Debtor 1 Kim Leigh Messick 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2024 State and **Federal Income Potential Tax Refund** \$1,425.00 Tax Refund 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$3,233.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case 1-25-10269-cjf Doc 1 Filed 02/10/25 Entered 02/10/25 12:12:07 Page 15 of 83 Document Case number (if known) Debtor 1 Kim Leigh Messick 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$13,971.00 57. Part 3: Total personal and household items, line 15 \$6.845.00 58. Part 4: Total financial assets, line 36 \$3,233.00

\$0.00

\$0.00

\$0.00

Copy personal property total

\$24,049.00

\$24,049.00

\$24,049.00

59. Part 5: Total business-related property, line 45

61. Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

60. Part 6: Total farm- and fishing-related property, line 52

63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 6

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			Document	P	age 16 of 83	_
Fil	I in this informa	ation to identify your c	ase:			
De	ebtor 1	Kim Leigh Messicl	Middle Name	L	ast Name	
	ebtor 2 bouse if, filing)	First Name	Middle Name	L	ast Name	
Un	nited States Banl	kruptcy Court for the:	WESTERN DISTRICT OF W	ISCC	DNSIN	
	ase number					☐ Check if this is an amended filing
O	fficial For	m 106C				
S	chedule	C: The Pro	perty You Cla	im	as Exempt	4/22
the nee	property you list	ted on <i>Schedule A/B: Pr</i> attach to this page as m	operty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
any fun exe to t	y applicable stands—may be un emption to a pa the applicable s	tutory limit. Some exe limited in dollar amou	nptions—such as those for nt. However, if you claim an and the value of the property	heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the , your exemption would be limited
1.	Which set of e	exemptions are you cla	iming? Check one only, even	if yo	our spouse is filing with you.	
	☐ You are clai	ming state and federal r	onbankruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)	
	You are clai	ming federal exemption	s. 11 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on <i>Schedu</i>	le A/B that you claim as exe	mpt,	fill in the information below.	
		n of the property and line nat lists this property	on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2016 Ford Education	dge 90000 miles e:	\$10,075.00		\$4,450.00	11 U.S.C. § 522(d)(2)
	Tag Type: VIN: 2FMPK State of Orig Title Date: 2 Registration Engine Size:	4K91GBB21944 jin: NC /10/2022 Expiration:			100% of fair market value, up to any applicable statutory limit	

Registrant: Lien Holder:

Line from Schedule A/B: 3.1

Debtor 1 Kim Leigh Messick			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2016 Ford Edge 90000 miles License Plate:	\$10,075.00		\$5,625.00	11 U.S.C. § 522(d)(5)
Tag Type: VIN: 2FMPK4K91GBB21944 State of Origin: NC Title Date: 2/10/2022 Registration Expiration: Engine Size: 122 Body: 4 Dr Wagon Sport Utility Owner: Registrant: Lien Holder: Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2010 Polaris ATV 549CC Line from Schedule A/B: 3.2	\$3,896.00		\$3,896.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Dishes Line from <i>Schedule A/B</i> : 6.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Line nom Schedule A/B. 0.1	☐ 100% of fair market value, up to any applicable statutory limit			
Utensils Line from Schedule A/B: 6.2	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Line Irom Scriedule A/B. 0.2			100% of fair market value, up to any applicable statutory limit	
Silverware	\$5.00		\$5.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit	
Small Appliances Line from Schedule A/B: 6.4	\$40.00		\$40.00	11 U.S.C. § 522(d)(3)
Line from Genedate A/D. 4.4			100% of fair market value, up to any applicable statutory limit	
Pots and Pans Line from Schedule A/B: 6.5	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Enterior Governo V.E. C.C			100% of fair market value, up to any applicable statutory limit	
Livingroon Furniture Line from Schedule A/B: 6.6	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)
Line nom Goriedale A.D. 9.9			100% of fair market value, up to any applicable statutory limit	
Dining room furniture Line from Schedule A/B: 6.7	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
LINE HOTH SUITEURIE A/D. V.1			100% of fair market value, up to any applicable statutory limit	
Bedroom Fruniture Line from Schedule A/B: 6.8	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)
EIRC HOITI GOITEUUIE A.D. 9.0			100% of fair market value, up to any applicable statutory limit	

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moker ne from Schedule A/B: 6.9	Current value of the portion you own Copy the value from Schedule A/B \$500.00		ount of the exemption you claim eck only one box for each exemption. \$500.00	Specific laws that allow exemption of the specific laws that allows the specific laws that allows the specific laws the specific laws that allows the specific laws the specific laws that allows the specific laws the specific laws that allows the specific laws the specific laws the specific laws that allows the specific laws the specific law
	Schedule A/B	Che	·	11 U.S.C. § 522(d)(3)
	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
no nom ouroune A.D. G.G		_		
			100% of fair market value, up to any applicable statutory limit	
Cross Bow Line from Schedule A/B: 9.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
ile IIIIII Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
lothing ne from <i>Schedule A/B</i> : 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
Ellie Holli Golleddio FAB.			100% of fair market value, up to any applicable statutory limit	
Checking: St Employee Credit Union Line from Schedule A/B: 17.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: Shell Lake State Bank ine from Schedule A/B: 17.2	\$8.00		\$8.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
avings: St Employee Credit Union	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
ne nom s <i>chedule A/B</i> . 11.3			100% of fair market value, up to any applicable statutory limit	
hecking: Shell Lake State Bank nt with Joel Brandenberg	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
ne from <i>Schedule A/B</i> : 17.4			100% of fair market value, up to any applicable statutory limit	
024 State and Federal Income Tax efund: Potential Tax Refund	\$1,425.00		\$1,425.00	11 U.S.C. § 522(d)(5)
ne from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	

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		Document Page 19	01 03		
Fill in this informat	ion to identify yo	ur case:			
Debtor 1	Kim Leigh Mes	sick			
	First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Nome		-	
(Spouse II, IIIIng)	FIIST Name	Middle Name Last Name			
United States Bankr	uptcy Court for the	E: WESTERN DISTRICT OF WISCONSIN		_	
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Farms (1000				
Official Form 1					
Schedule D	: Creditors	s Who Have Claims Secured	d by Propert	У	12/15
		. If two married people are filing together, both are eq out, number the entries, and attach it to this form. O			
number (if known).	3 ,	,	. ,	, , ,	
1. Do any creditors have	ve claims secured b	by your property?			
☐ No. Check thi	is box and submit	this form to the court with your other schedules. Y	ou have nothing else	to report on this form.	
Yes. Fill in all	of the information	below.			
Part 1: List All S	ecured Claims				
2. List all secured clai	ims. If a creditor has	more than one secured claim, list the creditor separately	, Column A	Column B	Column C
		as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured
	•	tical order according to the creditor's name.	value of collateral.	claim	If any
2.1 State Emplo	yees Credit	Describe the preparty that coourse the claims	\$6,356.05	\$10,075.00	\$0.00
Union Creditor's Name		Describe the property that secures the claim: 2016 Ford Edge 90000 miles	Ψ0,000.00	Ψ10,010.00	Ψ0.00
		License Plate:			
		Tag Type:			
		VIN: 2FMPK4K91GBB21944			
		State of Origin: NC			
		Title Date: 2/10/2022 Registration Expiration:			
		Engine Size: 122			
		Body: 4 Dr Wagon Sport Utility			
		Owner:			
		Registrant: Lien Holder:			
Attn: Bankru	. ,	As of the date you file, the claim is: Check all that			
Po Box 2527 Raleigh, NC		apply.			
Number, Street, City		☐ Contingent ☐ Unliquidated			
Number, Street, Oil	y, otate a zip code	☐ Disputed			
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only		car loan)			
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the o	debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim community debt	relates to a	Other (including a right to offset) Purchase I	Money Security		
	Opened				
	02/22 Last				
	Active				
Date debt was incurre	ed 12/23/24	Last 4 digits of account number 1402			
					amended filing 12/15 It information. If more space your name and case is form. Column C Unsecured portion If any
Add the deller velve	of your catalog !	Column A on this nego Write that number have	60.0	E6 0E	
	-	Column A on this page. Write that number here:		56.05	
Write that number h		and action raido totalo irolli dii pageo.	\$6,3	56.05	

Part 2: List Others to Be Notified for a Debt That You Already Listed

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Debtor	1 Kim Leigh Mess	sick		Case number (if known)	
	First Name	Middle Name	Last Name		
trying to	collect from you for a	debt you owe to somed debts that you listed in	one else, list the creditor in Part 1	at you already listed in Part 1. For , and then list the collection agenc rs here. If you do not have addition	y here. Similarly, if you have more
	Name, Number, Street, 0 State Employees 0 Po Box 25279	**		On which line in Part 1 did you enter t	he creditor? 2.1
	Raleigh, NC 27611				

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		Document	Page 21 of 8	33		
Fill in this infor	mation to identify your ca	se:				
Debtor 1	Kim Leigh Messick					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
, , , , ,	and an interest of the same than the same	WESTERN DISTRICT OF \	MICCONCINI			
United States B	ankruptcy Court for the:	WESTERN DISTRICT OF V	VISCONSIN			
Case number						
(if known)					_	eck if this is an ended filing
Official For	m 106E/F					
Schedule I	E/F: Creditors Wh	o Have Unsecure	ed Claims			12/15
Schedule D: Credi left. Attach the Co name and case nu	,	ed by Property. If more space If you have no information to	is needed, copy the Par	t you need, fill it out,	number the entri	es in the boxes on the
	All of Your PRIORITY Unse					
	tors have priority unsecured	claims against you?				
□ No. Go to	Part 2.					
identify what t possible, list t	ur priority unsecured claims. ype of claim it is. If a claim has he claims in alphabetical order e than one creditor holds a parti	both priority and nonpriority ame according to the creditor's name	ounts, list that claim here a e. If you have more than tv	and show both priority a	and nonpriority am	ounts. As much as
(For an explar	nation of each type of claim, see	e the instructions for this form in	the instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
	al Revenue Service	Last 4 digits of acc	count number	\$0.00	\$0.	.00 \$0.00
Insolve PO Bo	creditor's Name ency Unit x 7346 elphia, PA 19101-7346	When was the deb	t incurred?		-	
	Street City State Zip Code	<u> </u>	file, the claim is: Check	all that apply		
_	ed the debt? Check one.	☐ Contingent				
Debtor 1	,	☐ Unliquidated				
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIORITY				
☐ At least of	one of the debtors and another	☐ Domestic suppo	rt obligations			
☐ Check if	this claim is for a communit	_	in other debts you owe the	•		
	subject to offset?		or personal injury while yo	ou were intoxicated		
■ No		Other. Specify				
☐ Yes						

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Debt	or 1 Kim Leigh Messick		Case number (if known)		
2.2	Wisconsin Department of Revenue Priority Creditor's Name Special Procedures Unit PO Box 8901	Last 4 digits of account number When was the debt incurred?	\$0.00	\$0.00	\$0.00
	Madison, WI 53708-8901 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply		
	Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	■ Taxes and certain other debts you □ Claims for death or personal injury □ Other. Specify	_		
4. L u th	Yes. ist all of your nonpriority unsecured claims in the machine of claim, list the creditor separately for each contain an one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	ype of claim it is. Do not list claims already ir	cluded in Part 1	. If more
				Total claim	
4.1	Amazon.Com Inc	Last 4 digits of account number	3269		\$0.00
	Nonpriority Creditor's Name 410 Terry Avenue N Seattle, WA 98109	When was the debt incurred?	Opened 5/12/14 Last Active 10/27/20	_	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□ Yes	_ overlimit fe	es to the amount of late fees, es, interest fees, late charges, o dditional fee or charges	r	

Debte	or 1 Kim Leigh Messick		Case number (if kn	own)	
4.2	Amazon.Com Inc	Last 4 digits of account number	,		\$0.00
	Nonpriority Creditor's Name 410 Terry Avenue N Seattle, WA 98109	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that app	oly	
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sep	paration agreement or	divorce that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-shar	ing plans, and other si	milar debts	
	☐ Yes	overlimit f	as to the amounties, interest fee additional fee or	s, late charges, or	
4.3	American Express	Last 4 digits of account number	7693		\$9,001.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981535 El Paso, TX 79998	When was the debt incurred?	Opened 12/21 5/14/24	Last Active	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that app	ly	
	Who incurred the debt? Check one.	<u>_</u>			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	paration agreement or	divorce that you did not	
	No	Debts to pension or profit-shar	ing plans, and other si	milar debts	
	☐ Yes	late fees,	rd Disputed as to overlimit fees, in or any other add	terest fees, late	

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Debt	Kim Leigh Messick	Case number (if known)				
4.4	American Express National Bank Nonpriority Creditor's Name	Last 4 digits of account number C233	Unknown			
	c/o Gurstel Law Firm PC 622 N Water Street #400	When was the debt incurred? 10/24/24				
	Milwaukee, WI 53202 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	■ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
		Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	the amount of late fees, overlimit fees, interest fees, late charges, or any other additional fee or charges				
4.5	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number 5709	\$0.00			
	Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899 Number Street City State Zip Code	When was the debt incurred? Opened 12/21 Last Active 01/22 As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Credit Card Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or any other additional fee or charges				

Debtor	1 Kim Leigh Messick		Case number (if known)			
4.6	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	1901	\$0.00		
	Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 07/15 Last Active 7/01/21			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No □ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	late fees, o	I Disputed as to the amount of verlimit fees, interest fees, late any other additional fee or			
4.7	Barclays Bank Delaware	Last 4 digits of account number	5087	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8801	When was the debt incurred?	Opened 10/25/15 Last Active 1/16/18			
	Wilmington, DE 19899 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	■ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	late fees, o	I Disputed as to the amount of verlimit fees, interest fees, late any other additional fee or			

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Case number (if known) Debtor 1 Kim Leigh Messick 4.8 **Belk Dual Card** Last 4 digits of account number 3923 \$0.00 Nonpriority Creditor's Name Opened 3/20/19 Last Active 2801 W Tyvola Rd When was the debt incurred? 7/08/21 Charlotte, NC 28217 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Credit Card Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or any other additional fee or ■ Other Specify charges ☐ Yes 4.9 **Belk Dual Card** Last 4 digits of account number 4664 \$0.00 Nonpriority Creditor's Name Opened 1/27/22 Last Active 2801 W Tyvola Rd When was the debt incurred? 6/01/22 Charlotte, NC 28217 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or ☐ Yes Other. Specify any other additional fee or charges

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Belk Dual Card	Last 4 digits of account number	0041	
Nonpriority Creditor's Name	_	On and 0/00/40 Last Astins	
2801 W Tyvola Rd Charlotte, NC 28217	When was the debt incurred?	Opened 3/20/19 Last Active 03/21	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes		es, interest fees, late charges, or dditional fee or charges	
Capital One	Last 4 digits of account number	9808	
Nonpriority Creditor's Name	_		
Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 10/11 Last Active 5/13/15	
Salt Lake City, UT 84130	When was the dest mounted.	3/13/13	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
_	☐ Student loans		
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	☐ Student loans	rration agreement or divorce that you did not	
☐ At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a sepa		

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Care Credit	Last 4 digits of account number	9001	\$3,	
Nonpriority Creditor's Name Synchrony Financial P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?	Opened 1/10/24 Last Active 01/25		
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
Who incurred the debt? Check one.	_			
Debtor 1 only	Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
\square Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
Care Credit	Last 4 digits of account number	0750		
Nonpriority Creditor's Name Synchrony Financial P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?	Opened 5/03/18 Last Active 9/09/20		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	•	es to the amount of late fees, les, interest fees, late charges, or additional fee or charges		

Debtor	1 Kim Leigh Messick		Case number (if known)			
4.1	Chex Systems, Inc	Last 4 digits of account number		\$0.00		
Nonpriority Creditor's Name Attn: Consumer Relations 7805 Hudson Road Suite 100 Woodbury, MN 55125		When was the debt incurred?		· ·		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims				
	■ No	Debts to pension or profit-shar				
	Yes	overlimit f	as to the amount of late fees, ees, interest fees, late charges, or additional fee or charges			
4.1 5	Citibank	Last 4 digits of account number	7220	\$0.00		
	Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040	When was the debt incurred?	Opened 11/30/19 Last Active 6/13/21			
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur				
	\square Check if this claim is for a community debt		paration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-shar				
	☐Yes	late fees,	d Disputed as to the amount of overlimit fees, interest fees, late or any other additional fee or			

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Comenity	Last 4 digits of account number	1019		
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 9/23/17 Last Active 10/09/17		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
Yes San Bank	Other. Specify charges	es, or any other additional fee or		
Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	7417	,	
Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113	When was the debt incurred?	Opened 2/28/12 Last Active 11/22/15		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	_			
■ Debtor 1 only	Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
		d Disputed as to the amount of		
☐ Yes	late fees, o	overlimit fees, interest fees, late or any other additional fee or		

Dillards	Last 4 digits of account number	1883		
Nonpriority Creditor's Name	_			
1600 Cantrell Rd Little Rock, AR 72201	When was the debt incurred?	Opened 02/14 03/18	Last Active	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that appl	у	
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or c	divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts	
☐ Yes Discover Financial	Other. Specify charges	4299		\$3,
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	Last 4 digits of account number When was the debt incurred?	Opened 01/23 11/29/24	Last Active	φ3,.
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that appl	у	
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or c	divorce that you did not	
No	Debts to pension or profit-sharir	a plans, and other sin	nilar debts	
— NO		l Disputed as to		
□Yes	late fees, o	verlimit fees, int any other addit	terest fees, late	

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Essentia Health	Last 4 digits of account number	7895		\$
Nonpriority Creditor's Name Po Box 64618 Saint Paul, MN 55164-0618	When was the debt incurred?			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that appl	у	
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or d	livorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other sin	nilar debts	
Yes	Other. Specify any other a	es, interest fees additional fee or	s, late charges, or charges	
Gap	Last 4 digits of account number	0724		
Nonpriority Creditor's Name 2 Folsom Street San Francisco, CA 94105	When was the debt incurred?	Opened 07/08 09/08	Last Active	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	у	
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing	ng plans, and other sin	nilar debts	
	•	es to the amount	of late fees, , late charges, or	

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Debtor 1 Kim Leigh Messick Case number (if known) 4.2 JC Penney 6250 \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name **Corporate Office** Opened 11/27/17 Last Active 6501 Legacy Drive When was the debt incurred? 1/22/18 Plano, TX 75024 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or ☐ Yes Other. Specify any other additional fee or charges 4.2 JP Morgan Chase Bank N A 3062 \$3,957.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 9/06/19 Last Active PO BOX 182613 When was the debt incurred? 12/09/24 Columbus, OH 43218 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or ☐ Yes Other. Specify any other additional fee or charges

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LL Bean	Last 4 digits of account number	5464	
Nonpriority Creditor's Name	_	One and 40/25/45 Least Active	
15 Casco Street Freeport, ME 04033	When was the debt incurred?	Opened 10/25/15 Last Active 9/02/20	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	■ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes Loancare	Other. Specify charges	8366	
Nonpriority Creditor's Name	Last 4 digits of account number		
3637 Sentara Way Virginia Beach, VA 23452	When was the debt incurred?	Opened 12/20 Last Active 12/20	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing		
	amount of	Mortgage Disputed as to the late fees, overlimit fees, interest harges, or any other additional	

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Case number (if known)

Deptor	Kim Leigh Messick		(Jase number (if known)		
4.2	Macy Nonpriority Creditor's Name	Last 4 digits of account numb	oer	6370		\$0.00
	Atytn: Bankruptcy 701 E. 60th Street North Sioux Falls, SD 57104	When was the debt incurred?	,	Opened 08/08 Last Active 01/13	_	
	Number Street City State Zip Code	As of the date you file, the cla	ıim is	S: Check all that apply		
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured	claim:		
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sreport as priority claims	sepai	ration agreement or divorce that you did not		
	■ No □ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	of late fe	ees, rges	ount Disputed as to the amoun overlimit fees, interest fees, s, or any other additional fee or		
4.2	Mr. Cooper	Last 4 digits of account numb	oer	0894		\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 619098 Dallas, TX 75261	When was the debt incurred?	,	Opened 09/05 Last Active 01/17	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sereport as priority claims	:			
	■ No	Debts to pension or profit-sh				
	□Yes	amount fees, late	of la	Mortgage Disputed as to the ate fees, overlimit fees, interest larges, or any other additional		

Debtor	1 Kim Leigh Messick	Case number (if known)					
4.2 8	Peebles	Last 4 digits of account number	8180	\$0.00			
	Nonpriority Creditor's Name 1691 Michigan Avenue Suite 250 Miami Beach, FL 33139	When was the debt incurred?	Opened 01/13 Last Active 5/27/13				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure					
	\square Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Charge Ac of late fees late charge Charges					
4.2 9	PennyMac Loan Services, LLC	Last 4 digits of account number	0558	\$0.00			
	Nonpriority Creditor's Name Attn: Correspondence Unit Po Box 514387 Los Angeles, CA 90051	When was the debt incurred?	Opened 12/20 Last Active 02/22				
	Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	Пол					
	Debtor 1 only	☐ Contingent☐ Unliquidated					
	Debtor 2 only	_					
	Debtor 1 and Debtor 2 only	■ Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	Student loans					
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
		Real Estate Mortgage Disputed as to the					
	☐ Yes	amount of fees, late continued of the co					

Debto	or 1 Kim Leigh Messick	Case number (if known)			
4.3	Progress Loan	Last 4 digits of account number	\$0.00		
	Nonpriority Creditor's Name 2250 Westchester Ave	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims			
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
	— NO	·	s to the amount of late fees,		
	Yes	overlimit fo	ees, interest fees, late charges, or additional fee or charges		
4.3	QVC Inc.	Last 4 digits of account number	1313	\$0.00	
	Nonpriority Creditor's Name Customer Service 1200 Wilson Drive at Studio Park	When was the debt incurred?	Opened 12/27/15 Last Active 7/20/16		
	West Chester, PA 19380 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims			
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts		
	☐ Yes	_ overlimit fo	as to the amount of late fees, ees, interest fees, late charges, or additional fee or charges		
4.3	Riverview Law Office, LLC Nonpriority Creditor's Name	Last 4 digits of account number		\$928.00	
	PO Box 570 Sauk Rapids, MN 56379	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 			
	■ No				
	□Yes		s to the amount of late fees, ees, interest fees, late charges, or additional fee or charges		

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Debtor 1 Kim Leigh Messick Case number (if known) 4.3 Sams Club 4458 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **Headquarters** Opened 10/22/18 Last Active 2101 SE Simple Savings drive When was the debt incurred? 3/14/22 Bentonville, AR 72716 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or ☐ Yes ■ Other. Specify any other additional fee or charges 4.3 Sams Club 4787 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name **Headquarters** When was the debt incurred? 2101 SE Simple Savings drive Bentonville, AR 72716 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Is the claim subject to offset?

■ No

☐ Yes

report as priority claims

 \square Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify any other additional fee or charges

Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or

Debto	or 1 Kim Leigh Messick		Case number (if known)	
4.3 5	State Employees Credit Union	Last 4 digits of account number	1490	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 25279 Raleigh, NC 27611 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 02/17 Last Active 11/17 is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	tration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
4.3	□ Yes		additional fee or charges	
6	State Employees Credit Union Nonpriority Creditor's Name Attn: Bankruptcy Po Box 25279 Raleigh, NC 27611	Last 4 digits of account number When was the debt incurred?	1496 Opened 02/17 Last Active	\$0.00
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	_ overlimit fe	s to the amount of late fees, es, interest fees, late charges, or additional fee or charges	

Debto	r 1 Kim Leigh Messick		Case number (if known)	
4.3	Synchrony Bank	Last 4 digits of account number	6457	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Pob 965064 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 03/13 Last Active 01/19	
	Who incurred the debt? Check one. Debtor 1 only	As of the date you me, the claim is. Oneok an that apply		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing		
	☐ Yes	of late fees	count Disputed as to the amount , overlimit fees, interest fees, s, or any other additional fee or	
4.3	Talbots	Last 4 digits of account number	5167	\$0.00
	Nonpriority Creditor's Name 175 Beal St Hingham, MA 02043	When was the debt incurred?	Opened 5/24/14 Last Active 6/03/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	of late fees	count Disputed as to the amount , overlimit fees, interest fees, s, or any other additional fee or	

Debto	r 1 Kim Leigh Messick		Case number (if known)	
4.3	Talbots	Last 4 digits of account number	5167	\$0.00
	Nonpriority Creditor's Name	_		
	175 Beal St Hingham, MA 02043	When was the debt incurred?	Opened 05/14 Last Active 6/03/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	□ Yes	Disputed overlimit f	as to the amount of late fees, ees, interest fees, late charges, or additional fee or charges	
4.4	Tamarack Health Nonpriority Creditor's Name	Last 4 digits of account number	2446	\$175.90
	11040 N State Road 77 Hayward, WI 54843	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-shar	ng plans, and other similar debts	
	☐ Yes	overlimit f	as to the amount of late fees, ees, interest fees, late charges, or additional fee or charges	
4.4	Tamarack Health	Last 4 digits of account number	7830	\$1,999.37
	Nonpriority Creditor's Name 11040 N State Road 77	When was the debt incurred?		
	Hayward, WI 54843 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
			as to the amount of late fees,	
	☐ Yes	Other. Specify any other	ees, interest fees, late charges, or additional fee or charges	

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Debto	Kim Leigh Messick	Case number (if known)			
4.4	Tamarack Health Medical Center Nonpriority Creditor's Name	Last 4 digits of account number 8460	\$1,403.00		
	1615 Maple lane Ashland, WI 54806	When was the debt incurred? Opened 10/23 Last Active 03/23			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or any other additional fee or charges			
4.4	Tamarack Health Medical Center	Last 4 digits of account number 2446	\$184.77		
	Nonpriority Creditor's Name 1615 Maple lane Ashland, WI 54806	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or any other additional fee or charges			
4.4	Tamarack Health Medical Center	Last 4 digits of account number 7546	\$31.51		
	Nonpriority Creditor's Name 1615 Maple lane Ashland, WI 54806	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	■ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts			
	_	Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or			
	☐ Yes	Other. Specify any other additional fee or charges			

or 1 Kim Leigh Messick	Case number (if known)	
Tamarack Health Medical Center	Last 4 digits of account number 7318	\$47.27
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ-1.2
1615 Maple lane	When was the debt incurred?	
Ashland, WI 54806	As of the data way file the plains in Obsal all that and	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
	☐ Unliquidated	
Debtor 2 only		
Debtor 1 and Debtor 2 only	■ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Disputed as to the amount of late fees, overlimit fees, interest fees, late charges, or any other additional fee or charges	
Tamarack Health Medical Center	Last 4 digits of account number 8460	\$1,473.53
Nonpriority Creditor's Name	When was the debt incurred?	
1615 Maple lane Ashland, WI 54806	when was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
_ 110	Disputed as to the amount of late fees,	
Yes	overlimit fees, interest fees, late charges, or any other additional fee or charges	
Tamarack Health Medical Center	Last 4 digits of account number 7546	\$30.00
Nonpriority Creditor's Name 1615 Maple lane Ashland, WI 54806	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	■ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Disputed as to the amount of late fees,	
□Yes	overlimit fees, interest fees, late charges, or Other. Specify any other additional fee or charges	
■ res	- Outer, Openly any other additional tee or charges	

Kim Leigh Messick Case number (if known)			
Tamarack Health Medical Center	Last 4 digits of account number	8460	\$1,402.8
Nonpriority Creditor's Name 1615 Maple lane	When was the debt incurred?		
Ashland, WI 54806 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
United Wholesale Mortgage	Last 4 digits of account number	7329	\$0.
Nonpriority Creditor's Name Attn: Bankruptcy P. O. Box 619098 Dallas, TX 75261	When was the debt incurred?	Opened 02/07 Last Active 07/16	·
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
□ Yes	Real Estate amount of	e Mortgage Disputed as to the late fees, overlimit fees, interest harges, or any other additional	

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Debtor	1 Kim Leigh Messick	Case number (if known)				
4.5 0	Verizon Wireless	Last 4 digits of account numb	_{er} 4663	\$0.00		
	Nonpriority Creditor's Name Bankruptcy Administration 500 technology Drive Suite 550 Weldon, MO 63304	When was the debt incurred?	Opened 8/20/20 Last Active 11/01/20			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	m is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	☐ Yes	overlimit	as to the amount of late fees, fees, interest fees, late charges, or r additional fee or charges			
4.5 1	Walmart Credit Services	Last 4 digits of account numb	_{er} <u>5511</u>	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 1/28/14 Last Active 4/17/15			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	m is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	☐ Obligations arising out of a s report as priority claims	eparation agreement or divorce that you did not			
	■ No	Debts to pension or profit-sh	aring plans, and other similar debts			
	☐ Yes	of late fe	Account Disputed as to the amount es, overlimit fees, interest fees, ges, or any other additional fee or			

Debio	Killi Leigh Wessick	_		Case Humber (II known)	
4.5 2	Zales	Last 4 digits of accoun	t number	6653	\$0.00
	Nonpriority Creditor's Name				
	9797 Rombauer rd Coppell, TX 75019	When was the debt inc	urred?	Opened 09/17 Last Active 11/04/17	
	Number Street City State Zip Code	As of the date you file,	the claim	s: Check all that apply	
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	□ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising our report as priority claims	ut of a sepa	ration agreement or divorce that you did not	
	■ No	Debts to pension or p	orofit-sharin	g plans, and other similar debts	
		Dis	sputed a	is to the amount of late fees,	
	Yes			es, interest fees, late charges, or dditional fee or charges	
4.5 3	Zulify	Last 4 digits of accoun	t number	0729	\$0.00
	Nonpriority Creditor's Name 2601 Elliott Avenue,			Opened 9/23/18 Last Active	
	Suite 200,	When was the debt inc	urred?	2/25/19	
	Seattle, WA 98121				
	Number Street City State Zip Code	s: Check all that apply			
	Who incurred the debt? Check one.	Пол			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	report as priority claims	·	ration agreement or divorce that you did not	
	■ No	Debts to pension or p	orofit-sharin	g plans, and other similar debts	
				count Disputed as to the amount	
				, overlimit fees, interest fees,	
	☐ Yes		arges	s, or any other additional fee or	
			9		
Part 3	List Others to Be Notified About a De	ebt That You Already Liste	ed		
is try	this page only if you have others to be notified ying to collect from you for a debt you owe to s e more than one creditor for any of the debts th ied for any debts in Parts 1 or 2, do not fill out	omeone else, list the original at you listed in Parts 1 or 2, lis	creditor in	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	and Address	On which entry in Part 1 or Par	rt 2 did you	list the original creditor?	
	zon.Com Inc	Line 4.1 of (Check one):		$oldsymbol{l}$ Part 1: Creditors with Priority Unsecured Clair	
	ox 965015			Part 2: Creditors with Nonpriority Unsecured 0	Claims
Oriai	ndo, FL 32896	Last 4 digits of account number	er		
Nome	and Address	On which entry in Part 1 or Par	rt 2 did ve	list the original creditor?	
	and Address zon.Com Inc	Line 4.2 of (<i>Check one</i>):		list the original creditor $\!$	ns
Ро В	ox 965015	,		Part 2: Creditors with Nonpriority Unsecured 0	
Orlar	ndo, FL 32896	Last 4 digits of account number		and the second of the second o	-
		Last 4 digits of account number	71		
	and Address	On which entry in Part 1 or Par		_	
	ricollect Bankruptcy Dept.	Line 4.42 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured Clair	
Auli.	Dankiupicy Dept.			Part 2: Creditors with Nonpriority Unsecured (Claims

Debtor 1 Kim Leigh Messick	Case number (if known)	
P.O. Box 1566 Manitowoc, WI 54221	Last 4 digits of account number	
Name and Address Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.43 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.44 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.45 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.46 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.47 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Wallitowoo, WI 34221	Last 4 digits of account number	
Name and Address Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.48 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Wallitowoo, WI 34221	Last 4 digits of account number	
Name and Address Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.40 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Americollect, Inc 1851 S Alverno Road Manitowoc, WI 54221	Line 4.42 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number	
Name and Address Amex P.o. Box 981537 El Paso, TX 79998	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	
Name and Address Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	

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Debtor 1 Kim Leigh Messick		Case number (if known)
	Last 4 digits of account number	
Name and Address Barclays Bank Delaware P.o. Box 8803	On which entry in Part 1 or Part 2 did y Line 4.6 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington, DE 19899	Last 4 digits of account number	— Full 2. Ordulors with Nonpholity of second ordina
Name and Address Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899	On which entry in Part 1 or Part 2 did y Line 4.7 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Willington, DE 19699	Last 4 digits of account number	
Name and Address Capital One Po Box 31293 Sold Lake City LIT 24424	On which entry in Part 1 or Part 2 did y Line 4.11 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Salt Lake City, UT 84131	Last 4 digits of account number	
Name and Address Capital One Corporate Office 1680 Capital One Drive Mc Lean, VA 22102	On which entry in Part 1 or Part 2 did y Line 4.51 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Citi Po Box 6497 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.24 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Citi Bank Corporate Office 399 Park Ave New York, NY 10043	On which entry in Part 1 or Part 2 did y Line 4.24 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Citibank Po Box 6217 Sioux Falls, SD 57117	On which entry in Part 1 or Part 2 did y Line 4.15 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Comenity Bank Po Box 182789 Columbus, OH 43218	Line 4.38 of (Check one): Last 4 digits of account number	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Comenity Bank Po Box 182789 Columbus, OH 43218		□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Comenity Bank Corporate Office 2795 East Cottonwood Parkway Suite 100 Salt Lake City, UT 84121		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	Last 4 digits of account number On which entry in Part 1 or Part 2 did y	ou list the original creditor?
Comenity Bank Po Box 182789		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 Kim Leigh Messick	Case number (if known)		
Columbus, OH 43218	Last 4 digits of account number		
Name and Address Comenity Bank Po Box 182120 Columbus, OH 43218	On which entry in Part 1 or Part 2 d Line 4.52 of (<i>Check one</i>): Last 4 digits of account number	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Comenity Bank Corporate Office 2795 East Cottonwood Parkway Suite 100 Salt Lake City, UT 84121	On which entry in Part 1 or Part 2 d Line 4.52 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Comenity Capital Bank Corperate office 12921 South Vista Station Blvd. Draper, UT 84020	Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.38 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Comenity Capital Bank Corperate office 12921 South Vista Station Blvd. Draper, UT 84020	On which entry in Part 1 or Part 2 d Line 4.28 of (Check one): Last 4 digits of account number	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Comenitycapital/fFe21 Po Box 182120 Columbus, OH 43218	On which entry in Part 1 or Part 2 d Line 4.16 of (Check one): Last 4 digits of account number	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Credit One Bank Po Box 98872 Las Vegas, NV 89193	On which entry in Part 1 or Part 2 d Line 4.17 of (Check one): Last 4 digits of account number	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Discover Financial Po Box 30939 Salt Lake City, UT 84130	On which entry in Part 1 or Part 2 d Line 4.19 of (Check one): Last 4 digits of account number	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Gurstel Law Firm 622 N Water Street Suite 400 Milwaukee, WI 53202	On which entry in Part 1 or Part 2 d Line 4.4 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address JP Morgan Chase Bank N A PO BOX 15369 Columbus, OH 43218	On which entry in Part 1 or Part 2 d Line 4.23 of (Check one): Last 4 digits of account number	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address JP Morgan Chase Bank N A 111 E Wisconsin Avenue Milwaukee, WI 53202	On which entry in Part 1 or Part 2 d Line 4.23 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	

Official Form 106 E/F

Debtor 1 Kim Leigh Messick	Case number (if known)
Macy's/ DSNB Po Box 6789 Sioux Falls, SD 57117	Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
	Last 4 digits of account number
Name and Address Mr. Cooper 8950 Cypress Waters Coppell, TX 75019	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.27 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ооррош, т. т. осто	Last 4 digits of account number
Name and Address Mrc/united Wholesale M 350 Highland Houston, TX 77067	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.49 of (Check one):
Name and Address PennyMac Loan Services, LLC Po Box 514387 Los Angeles, CA 90051	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.29 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Resurgent Acquisitions LLC Po Box 10497 Greenville, SC 29603	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.34 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address State Employees Credit Union Po Box 25279 Raleigh, NC 27611	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.35 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address State Employees Credit Union Po Box 25279 Raleigh, NC 27611	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.36 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Sycrony Po Box 71750 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Sycrony Bank Po Box 71750 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Synchrony Bank Po Box 71757 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Synchrony Bank Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Synchrony Bank	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one):

Official Form 106 E/F

Debtor 1 Kim Leigh Messick		Case number (if known)	
Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Po Box 71737 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Po Box 71750 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 die Line 4.37 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807	On which entry in Part 1 or Part 2 div Line 4.8 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807	On which entry in Part 1 or Part 2 die Line 4.9 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Po Box 71750 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 die Line 4.10 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807	On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807	On which entry in Part 1 or Part 2 die Line 4.13 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Po Box 71757 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 die Line 4.13 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Synchrony Bank Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807	On which entry in Part 1 or Part 2 did Line 4.21 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	

Debtor 1 Kim Leigh Messick		Case number (if known)	
Name and Address Synchrony Bank	On which entry in Part 1 or Part 2 Line 4.21 of (<i>Check one</i>):	· ·	
Po Box 71727	Line 4.21 of (Check one).	 □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims 	
Philadelphia, PA 19176		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Synchrony Bank	Line 4.22 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Headquarters 200 Crossing Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Suite 101			
Bridgewater, NJ 08807	Look 4 digits of appount number		
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Synchrony Bank Po Box 71729	Line 4.22 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Philadelphia, PA 19176		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Synchrony Bank	Line 4.31 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Po Box 71727 Philadelphia, PA 19176		■ Part 2: Creditors with Nonpriority Unsecured Claims	
· · ··································	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Synchrony Bank	Line 4.31 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Headquarters		■ Part 2: Creditors with Nonpriority Unsecured Claims	
200 Crossing Blvd Suite 101			
Bridgewater, NJ 08807			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Synchrony Bank Po Box 71727	Line 4.33 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Philadelphia, PA 19176		■ Part 2: Creditors with Nonpriority Unsecured Claims	
• /	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Synchrony Bank	Line 4.33 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Headquarters 200 Crossing Blvd		Part 2: Creditors with Nonpriority Unsecured Claims	
Suite 101			
Bridgewater, NJ 08807	Local Audicides of account accombination		
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Synchrony Bank Headquarters	Line 4.50 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
200 Crossing Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Suite 101			
Bridgewater, NJ 08807	Last 4 digits of account number		
Name and Address	On which autoria Dart 4 on Bart 9	did con that the entire of one disease?	
Name and Address Synchrony Bank	On which entry in Part 1 or Part 2 Line 4.53 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Headquarters		Part 2: Creditors with Nonpriority Unsecured Claims	
200 Crossing Blvd		, art 2. Ground of man rid iphony Gridocarda Gianno	
Suite 101 Bridgewater, NJ 08807			
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Tamarack Health	Line 4.48 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
11040 N State Road 77 Hayward, WI 54843		■ Part 2: Creditors with Nonpriority Unsecured Claims	
,, 07070			

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Debtor 1 Kim Leigh Messick	Case number (if known)					
	Last 4 digits of account number					
Name and Address Tamarack Health Medical Center 1615 Maple lane	On which entry in Part 1 or Part 2 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Ashland, WI 54806	Last 4 digits of account number	- Part 2: Creditors with Nonphority Onsecured Claims				
Name and Address Town Bank Po Box 714 Des Plaines, IL 60018	On which entry in Part 1 or Part 2 of Line 4.25 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Wal-Mart 702 S.W. 8th Street Bentonville, AR 72716	On which entry in Part 1 or Part 2 of Line 4.51 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Walmart Credit Card PO BOX 530927 Atlanta, GA 30353	On which entry in Part 1 or Part 2 of Line 4.51 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Walmart Credit Services Po Box 71746 Philadelphia, PA 19176	On which entry in Part 1 or Part 2 of Line 4.51 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Wells Fargo Po Box 393 Minneapolis, MN 55480	On which entry in Part 1 or Part 2 or Line 4.18 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address Wells Fargo Corperate office 420 Montgomery Street San Francisco, CA 94104	On which entry in Part 1 or Part 2 or Line 4.18 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
	1 3ST 4 DIDITS OF SCHOOL BUMBER					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 27,298.17

Debtor 1 Kim Leigh Messick Case number (if known)

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **27,298.17**

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Fill in this infor	Fill in this information to identify your case:								
Debtor 1	Kim Leigh Messi	ck							
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF WISCONSIN						
Case number									
(if known)									

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Joel Brandenberg
W8234 St Croix trail Road
Minong, WI 54849

State what the contract or lease is for
month to month rent

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Fill in thi	s information to identify yo	ur case:			
Debtor 1	Kim Leigh Mes	sick			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the	: WESTERN DISTRICT OF	WISCONSIN		
Case nun	nher				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
Sche	dule H: Your Co	debtors			12/15
1. Do No No L. Wi Arizo	e filing together, both are eand number the entries in the end case number (if known you have any codebtors? by you have any codebtors? code thin the last 8 years, have you, California, Idaho, Louisian by Go to line 3.	qually responsible for supplyi	ng correct informa ne Additional Page not list either spouse erty state or territo o Rico, Texas, Wash	tion. If more space is report to this page. On the to e as a codebtor. Try? (Community property)	
	■ No □ Yes.				
	In which community st	ate or territory did you live?	-NONE-	. Fill in the name a	nd current address of that person.
in lin Form	e 2 again as a codebtor onl	zip Code ebtors. Do not include your sp y if that person is a guarantor	or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	e
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code		
3.2				Cobodulo D. E	•
3.2	Name			☐ Schedule D, lir☐ Schedule E/F,	
				☐ Schedule G, lir	
	Number Street				
	City	State	ZIP Code		

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						•				
	in this information to identify your btor 1 Kim Leigh									
		WESSICK			_					
	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court for th	e: WESTERN DISTRICT	OF WISCONSIN							
1	se number						k if this is:			
(II KI	nown)						n amende	Ū		
_									g postpetition ollowing date:	
<u>O</u>	fficial Form 106l					N	MM / DD/ Y	YYYY		
S	chedule I: Your Ind	come								12/1
spo atta	plying correct information. If youse. If you are separated and you has separate sheet to this form Describe Employmen	ur spouse is not filing wi . On the top of any addition	th you, do not inclu	ide infor	mati	on abou	t your spo	ouse. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job,	Employment status	☐ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	■ Not employed				☐ Not e	mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	nere?				_			
Pai	rt 2: Give Details About Mo	onthly Income								
	imate monthly income as of the use unless you are separated.	date you file this form. If y	you have nothing to ı	report for	any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
-	ou or your non-filing spouse have n e space, attach a separate sheet t		ombine the information	on for all e	empl	oyers for	that perso	on on the li	nes below. If	you need
						For Del	btor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	- -
4.	Calculate gross Income. Add	ine 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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Debt	tor 1	Kim Leigh Messick	_	С	Case number (if kn	own)				
					For Debtor 1		For	Debtor	2 or	
					TOT DEDICT T			-filing s		
	Cop	y line 4 here	4.		\$ 0	.00	\$		N/A	_
_										_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.			.00	\$_		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.		. — — —	.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$_		N/A	_
	5e. 5f.	Insurance	5e. 5f.		. —	0.00	\$_ \$		N/A	_
	5g.	Domestic support obligations Union dues			·	0.00	* *		N/A N/A	_
	5y. 5h.	Other deductions. Specify:	5g. 5h.			0.00			N/A	_
_			_							_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.			0.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ C	.00	\$		N/A	<u>.</u>
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			.00	\$		N/A	_
	8b.	Interest and dividends	8b.		\$0	.00	\$		N/A	<u>. </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent								
		regularly receive Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.		\$ 0	.00	\$		N/A	
	8d.	Unemployment compensation	8d.		\$ 0	.00	\$		N/A	
	8e.	Social Security	8e.		\$ 1,606	.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive								_
		Include cash assistance and the value (if known) of any non-cash assistance								
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.								
		Specify:	8f.		\$ 0	.00	\$		N/A	
	8g.	Pension or retirement income	 8g.		\$ 1,360	.10	\$		N/A	_
	8h.	Other monthly income. Specify:	8h.	.+	\$ 0	.00	+ \$		N/A	_
										_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,966	5.10	\$_		N/	A
										_
10.			10.	\$_	2,966.10	+ \$_		N/A	= \$_	2,966.10
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L							
11.		e all other regular contributions to the expenses that you list in Schedule								
		ude contributions from an unmarried partner, members of your household, your er friends or relatives.	depe	ende	ents, your room	mates	s, and			
		not include any amounts already included in lines 2-10 or amounts that are not	availa	able	to pay expens	es list	ed in S	Scheduk	e J.	
	Spe								+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The res								
	app	e that amount on the Summary of Schedules and Statistical Summary of Certai	n Liai	DIIIti	les and Related	ı Data	i, IT IT	12.	\$	2,966.10
	арр	163								·
									Combi	
13.	Do	you expect an increase or decrease within the year after you file this form	?						month	ly income
		No.								
	$\overline{}$	Yes Explain:								

Official Form 106l Schedule I: Your Income page 2

	in this informe	tion to identify yo	our casa:			I		
						<u> </u>	de if their in	
Deb	tor 1	Kim Leigh M	lessick				ck if this is: An amended filing	
	tor 2						A supplement show	ving postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bankr	uptcy Court for the	: WESTE	ERN DISTRICT OF WISCO	DNSIN	-	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Part		ibe Your House	ehold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								□ Yes
								□No
								Yes
								□ No □ Yes
3.		enses include		No				□ res
		f people other t d your depende	han $_{oldsymbol{\square}}$	Yes				
Part		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of suct ficial Form 10		d have inc	cluded it on Schedule I: \	our Income		Your exp	enses
						_		
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$	i	650.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	i	0.00
	•	rty, homeowner's	-			4b. \$		0.00
		maintenance, re owner's associa		upkeep expenses		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	4u. ‡		0.00

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Debtor 1	Kim Leigh Messick	Case num	ber (if known)	
. Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	·	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		80.00
6d.	Other. Specify:	6d.		0.00
	and housekeeping supplies	7.	*	400.00
	care and children's education costs	8.	\$	
		9.	*	0.00
	ing, laundry, and dry cleaning		\$	100.00
	onal care products and services	10.	·	75.00
	cal and dental expenses	11.	\$	150.00
	sportation. Include gas, maintenance, bus or train fare.	10	¢.	400.00
	ot include car payments.	12.	·	
	tainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
	table contributions and religious donations	14.	\$	0.00
5. Insur				
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	100.00
15d.	Other insurance. Specify:	15d.	\$	0.00
. Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Speci	, , ,	16.	\$	0.00
. Instal	Ilment or lease payments:			
	Car payments for Vehicle 1	17a.	\$	563.00
	Car payments for Vehicle 2	17b.		0.00
	Other Specify	17c.	*	0.00
	Other. Specify:	17d.	·	
			Ψ	0.00
S. Your	payments of alimony, maintenance, and support that you did not report a	as 18.	\$	0.00
	cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I) r payments you make to support others who do not live with you.). 10.	\$	0.00
		40	Φ	0.00
Speci	•	19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sci			0.00
	Mortgages on other property	20a.	· · · · · · · · · · · · · · · · · · ·	0.00
	Real estate taxes	20b.	·	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	·	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Other	: Specify: Gifts	21.	+\$	20.00
Ciga	rettes		+\$	100.00
. Calcı	ılate your monthly expenses			
22a. /	Add lines 4 through 21.		\$	2,738.00
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,738.00
	and more and and and the record to your monthly expenses.		*	2,730.00
. Calcı	late your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,966.10
	Copy your monthly expenses from line 22c above.	23b.	·	2,738.00
23c.	Subtract your monthly expenses from your monthly income.			_
	The result is your <i>monthly net income</i> .	23c.	\$	228.10
	······································		<u> </u>	
	ou expect an increase or decrease in your expenses within the year after	you file this	form?	
4. Do yo For ex	ample, do you expect to finish paying for your car loan within the year or do you expect yo			or decrease because of a
I. Do yo For ex				or decrease because of a
Do yo	ample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?			e or decrease because of a

Fill in this infor	rmation to identify your	case:			
Debtor 1	Kim Leigh Mession				
	First Name	Middle Name	Last Name		
Debtor 2	E. All	A4: 111 A1			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF WISCONSIN		
Case number					
(if known)				l	☐ Check if this is an amended filing
You must file th obtaining mone years, or both. 1	is form whenever you fi y or property by fraud ii 18 U.S.C. §§ 152, 1341, 1	le bankruptcy schedules		rect information. . Making a false statement, o in fines up to \$250,000, or in	
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				Petition Preparer's Notice, gnature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules file	d with this declaration and	
X /s/ Kin	n Leigh Messick		X		
	eigh Messick		Signature of	Debtor 2	
Signatu	ure of Debtor 1				
Date	February 10, 2025		Date		

Fill	l in this info	rmation to identify you	r case:					
De	btor 1	Kim Leigh Mess	ick					
		First Name	Middle Name		Last Name			
	btor 2 buse if, filing)	First Name	Middle Name		Last Name			
Uni	ited States E	Bankruptcy Court for the:	WESTERN DISTRICT	OF WIS	CONSIN			
1	se number						_	ck if this is an
		orm 107	Affairs for Indiv	/idua	ls Filing for B	ankruntcy	umoi	04/2
Be a	as complete ermation. If	e and accurate as poss	ible. If two married peop attach a separate sheet	le are fil	ing together, both are	equally responsible for		ng correct
Pai	rt 1: Give	e Details About Your Ma	arital Status and Where Y	ou Live	d Before			
1.	What is yo	our current marital statu	ıs?					
	☐ Marrie	ed.						
	_	narried						
2.	During the	e last 3 years, have you	lived anywhere other that	an wher	e you live now?			
	■ No □ Yes. I	List all of the places you	lived in the last 3 years. Do	o not incl	lude where you live now	ı.		
	Debtor 1:		Dates Debto	r 1	Debtor 2 Prior Ac	dress:		Dates Debtor 2 ived there
3. stat			ver live with a spouse or lifornia, Idaho, Louisiana,					
	■ No □ Yes. I	Make sure you fill out <i>Sci</i>	hedule H: Your Codebtors	(Official	Form 106H).			
Pa	rt 2 Exp	lain the Sources of You	ır Income					
4.	Fill in the to	otal amount of income yo	nployment or from opera ou received from all jobs ar have income that you rec	nd all bus	sinesses, including part	time activities.	s calenda	r years?
	☐ Yes. I	Fill in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(be	ross income efore deductions and clusions)	Sources of income Check all that apply.	(Gross income before deductions and exclusions)

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De	btor 1	Kir	n Leigh N	lessick	Documen		e number (if known)	
		1311	ii Ecigii ii	ICOSION				
5.	Include and o winnin	ther page 1	come regard oublic bene f you are fil	dless of wheth fit payments; ing a joint cas	e during this year or the two her that income is taxable. Exa pensions; rental income; intereste her and you have income that you	imples of other income are all est; dividends; money collect ou received together, list it o	ed from lawsuits; royalties; ar nly once under Debtor 1.	Security, unemployment, nd gambling and lottery
		Yes. I	Fill in the de	etails.				
					Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
			1 of curre iled for bar	nt year until nkruptcy:	Social Security	\$1,606.00		
					Pensions & Annuities	\$1,861.91		
			dar year: December	31, 2024)	Social Security	\$18,804.00		
					Pensions & Annuities	\$22,343.00		
			dar year be December		Social Security	\$12,144.00		
					Pensions & Annuities	\$22,343.00		
Pa	rt 3:	List	Certain Pa	ayments You	Made Before You Filed for E	3ankruptcy		
6.	_	No.	Neither Dindividual During the No. Yes * Subject	ebtor 1 nor D primarily for a e 90 days befor Go to line 7 List below e paid that crunot include to adjustment or Debtor 2 o e 90 days befor Go to line 7 List below e include pay	each creditor to whom you paid editor. Do not include payment payments to an attorney for that ton 4/01/25 and every 3 years or both have primarily consulate you filed for bankruptcy, dictions.	mer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$7,575* or more in the for domestic support obligations bankruptcy case. In a fater that for cases filed on the mer debts. d you pay any creditor a total d a total of \$600 or more and	of \$7,575* or more? n one or more payments and ations, such as child support at or after the date of adjustment of \$600 or more?	the total amount you and alimony. Also, do it.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
State Employees Credit Union Attn: Bankruptcy Po Box 25279 Raleigh, NC 27611	1st each month	\$1,689.00	\$6,356.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

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Del	otor 1 Kim Leigh Messick	Document	Page 64 01 83	se number (if known)		
DC	Killi Leigh Messick			e namber (ii known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Joel Brandenberg W8234 St Croix trail Road Minong, WI 54849	1st each month	\$1,950.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ■ Other Re	rd payment or vendors
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any gencontrol, or owner of 20%	neral partners; partners or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	I partner; corporations gent, including one for
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co ■ No □ Yes. List all payments to an insider		yments or transfer a	any property on a	ccount of a de	bt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment tor's name
Pai	rt 4: Identify Legal Actions, Repossessio	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	tcy, were you a party in a				
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupe Check all that apply and fill in the details below. ■ No. Go to line 11. □ Yes. Fill in the information below.		perty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property	•	Date		Value of the
		Explain what happene	ed			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or fii	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a		perty in the possess			fit of creditors, a

☐ Yes

Case number (if known)

Pa	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con	tcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupte or gambling? ■ No □ Yes. Fill in the details.	cy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	Describe the property you lost and how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of <i>Schedule A/B: Property.</i>	Date of your loss	Value of property lost
	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or paring a bankruptcy petition? parers, or credit counseling agencies for services require		erty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Lein Law Offices LLP Po Box 761 Hayward, WI 54843	Attorney Fee	12/18/24	\$2,217.00
	001 Debtorcc, Inc 378 Summit Avenue Jersey City, NJ 07306	Counseing	12/23/24	\$14.95
17.		cy, did you or anyone else acting on your behalf pay or sor to make payments to your creditors? Solution of the second of the s	or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was made	payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Debtor 1 Kim Leigh Messick

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Debtor 1 Kim Leigh Messick

Case number (if known)

	transferred in the ordinary course of your Include both outright transfers and transfers minclude gifts and transfers that you have alreated No Yes. Fill in the details.	nade as security (such as	the granting of a	security int	erest or mortgage on you	r property). Do not
	Person Who Received Transfer Address	Description and v property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pi ■ No □ Yes. Fill in the details.		ny property to a	self-settle	d trust or similar device	of which you are a
	Name of trust	Description and	value of the pro	perty trans	ferred	Date Transfer was
						maue
Pai	t 8: List of Certain Financial Accounts, Ir	istruments, Safe Deposi	t Boxes, and St	orage Unit	S	
20.	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage					
	houses, pension funds, cooperatives, assoNoYes. Fill in the details.	ociations, and other final				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balanc before closing c transfe
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, a	ny safe dep	oosit box or other depos	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than your	r home within 1	year befor	e you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Contro	I for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any proper	ty you borr	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, Strode)		Describe	the property	Valu
Pai	t 10: Give Details About Environmental In	,				

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Kim Leigh Messick

regulations controlling the cleanup of these substances, wastes, or material.

Case number (if known)

	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.				
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they	occurred.	
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	e unde	er or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice
26.	■ No	strative proceeding under any env	ironm	nental law? Include settlements a	nd orders.
	Yes. Fill in the details. Case Title	Court or agency	Nati	ure of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	Hatt	are of the case	case
Par	t 11: Give Details About Your Business or Con	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have ar	ny of t	the following connections to any	business?
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity	, eithe	er full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LI	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execut	ive of a corporation			
	☐ An owner of at least 5% of the voting or	equity securities of a corporation			
	■ No. None of the above applies. Go to Part 1	12.			
	Yes. Check all that apply above and fill in the	he details below for each busines	s.		
	Business Name Des	scribe the nature of the business		Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper		Do not include Social Security no Dates business existed	number or ITIN.
28.	Within 2 years before you filed for bankruptcy, constitutions, creditors, or other parties.	did you give a financial statement	to an	yone about your business? Inclu	de all financial
	■ No				
	☐ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	te Issued			

Part 12: Sign Below

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with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Kim Leigh Messick

Kim Leigh Messick

Signature of Debtor 2

Signature of Debtor 1

Date February 10, 2025

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform				
	nation to identify your	case:		
Debtor 1	Kim Leigh Messic	k		_
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	-
United States Ba	nkruptcy Court for the:	WESTERN DISTF	RICT OF WISCONSIN	_
Case number (if known)				☐ Check if this is an amended filing
Official Fo Statemer		n for Indiv	riduals Filing Under Cha	pter 7 12/15
you have leas You must file this whiche on the If two married pe sign an	ver is earlier, unless th form cople are filing together d date the form.	ur property, or and the lease has no inthin 30 days after the court extends the in a joint case, bother in a form space is nber (if known).		to the creditors and lessors you list rect information. Both debtors must
1. For any credite		art 1 of Schedule D	: Creditors Who Have Claims Secured by Pro	pperty (Official Form 106D), fill in the
	editor and the property t	hat is salletaral		
identify the cre	,	nat is collateral	What do you intend to do with the property secures a debt?	y that Did you claim the property as exempt on Schedule C?

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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Deb	otor 1	Kim Leigl	h Messick	Case number (if known	
Les	sor's na	ame:	Joel Brandenberg		□ No
					■ Yes
	scriptior perty:	n of leased	month to month rent		
Und	er pena			I my intention about any property of my estate that so	ecures a debt and any personal
Х	-	im Leigh N	·	x	
Kim Leigh Messick Signature of Debtor 1		_		Signature of Debtor 2	
	Date	Februa	ary 10, 2025	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1-25-10269-cjf Doc 1 Filed 02/10/25 Entered 02/10/25 12:12:07 Desc Main Document Page 75 of 83

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Wisconsin

In r	e Kim Leigh M	essick				Case No				
					Debtor(s)	Chapter	7			
	DI	SCLO	SURE OF COM	MPENSATIO	N OF ATTOR	NEY FOR D	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:									
	For legal servi	ces, I ha	ve agreed to accept			\$	2,217.00			
	Prior to the fil	ing of thi	is statement I have rec	eived		\$	2,217.00			
	Balance Due						0.00			
2.	The source of the compensation paid to me was:									
	Debtor		Other (specify):							
3.	The source of comp	ensation	n to be paid to me is:							
	Debtor		Other (specify):							
4.	☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm									
	copy of the agr	eement,	he above-disclosed co together with a list of hite to attend the 3	the names of the p	eople sharing in the					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:									
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing or reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 									
6.	Represe	ntation	or(s), the above-discler of the debtors in a sary proceeding.				ces, relief from	stay actions or		
				CERTIF	ICATION					
this	I certify that the for bankruptcy proceed		s a complete statemen	t of any agreemen	or arrangement for p	payment to me for	representation of	the debtor(s) in		
	February 10, 2025	5		,	s/ Matthew C Leir	1				
_	Date				Matthew C Lein					
					Signature of Attorney					
					Lein Law Offices,	LLP				
					P.O. Box 761 I5692 Hwy 63 Nor	th				
					Havward. WI 5484					
					715-63 <i>1</i> -4273	-				

Name of law firm

United States Bankruptcy Court Western District of Wisconsin

Western District of Wisconsin										
In re	Kim Leigh Messick		Case No.							
		Debtor(s)	Chapter	7						
	V .	ATRIX								
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.										
Date:	February 10, 2025	/s/ Kim Leigh Messick								
	·	Kim Leigh Messick								

Signature of Debtor

Amazon.Com Inc 410 Terry Avenue N Seattle, WA 98109

Amazon.Com Inc Po Box 965015 Orlando, FL 32896

American Express Correspondence/Bankruptcy Po Box 981535 El Paso, TX 79998

American Express National Bank c/o Gurstel Law Firm PC 622 N Water Street #400 Milwaukee, WI 53202

Americollect Attn: Bankruptcy Dept. P.O. Box 1566 Manitowoc, WI 54221

Americollect, Inc 1851 S Alverno Road Manitowoc, WI 54221

Amex P.o. Box 981537 El Paso, TX 79998

Barclays Bank Delaware Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899

Barclays Bank Delaware P.o. Box 8803 Wilmington, DE 19899

Belk Dual Card 2801 W Tyvola Rd Charlotte, NC 28217

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Po Box 31293 Salt Lake City, UT 84131 Capital One Corporate Office 1680 Capital One Drive Mc Lean, VA 22102

Care Credit Synchrony Financial P.O. Box 960061 Orlando, FL 32896-0061

Chex Systems, Inc Attn: Consumer Relations 7805 Hudson Road Suite 100 Woodbury, MN 55125

Citi Po Box 6497 Sioux Falls, SD 57117

Citi Bank Corporate Office 399 Park Ave New York, NY 10043

Citibank Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 St Louis, MO 63179

Citibank Po Box 6217 Sioux Falls, SD 57117

Comenity Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank Po Box 182789 Columbus, OH 43218

Comenity Bank Corporate Office 2795 East Cottonwood Parkway Suite 100 Salt Lake City, UT 84121

Comenity Bank Po Box 182120 Columbus, OH 43218 Comenity Capital Bank Corperate office 12921 South Vista Station Blvd. Draper, UT 84020

Comenitycapital/fFe21 Po Box 182120 Columbus, OH 43218

Credit One Bank Attn: Bankruptcy Department 6801 Cimarron Rd Las Vegas, NV 89113

Credit One Bank Po Box 98872 Las Vegas, NV 89193

Dillards 1600 Cantrell Rd Little Rock, AR 72201

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Discover Financial Po Box 30939 Salt Lake City, UT 84130

Essentia Health Po Box 64618 Saint Paul, MN 55164-0618

Gap 2 Folsom Street San Francisco, CA 94105

Gurstel Law Firm 622 N Water Street Suite 400 Milwaukee, WI 53202

Internal Revenue Service Insolvency Unit PO Box 7346 Philadelphia, PA 19101-7346

JC Penney Corporate Office 6501 Legacy Drive Plano, TX 75024 Joel Brandenberg W8234 St Croix trail Road Minong, WI 54849

JP Morgan Chase Bank N A PO BOX 182613 Columbus, OH 43218

JP Morgan Chase Bank N A PO BOX 15369 Columbus, OH 43218

JP Morgan Chase Bank N A 111 E Wisconsin Avenue Milwaukee, WI 53202

LL Bean 15 Casco Street Freeport, ME 04033

Loancare 3637 Sentara Way Virginia Beach, VA 23452

Macy

Atytn: Bankruptcy 701 E. 60th Street North Sioux Falls, SD 57104

Macy's/ DSNB Po Box 6789 Sioux Falls, SD 57117

Mr. Cooper Attn: Bankruptcy Po Box 619098 Dallas, TX 75261

Mr. Cooper 8950 Cypress Waters Coppell, TX 75019

Mrc/united Wholesale M 350 Highland Houston, TX 77067

Peebles 1691 Michigan Avenue Suite 250 Miami Beach, FL 33139

PennyMac Loan Services, LLC Attn: Correspondence Unit Po Box 514387 Los Angeles, CA 90051

PennyMac Loan Services, LLC Po Box 514387 Los Angeles, CA 90051

Progress Loan 2250 Westchester Ave Bronx, NY 10462

QVC Inc. Customer Service 1200 Wilson Drive at Studio Park West Chester, PA 19380

Resurgent Acquisitions LLC Po Box 10497 Greenville, SC 29603

Riverview Law Office, LLC PO Box 570 Sauk Rapids, MN 56379

Sams Club Headquarters 2101 SE Simple Savings drive Bentonville, AR 72716

State Employees Credit Union Attn: Bankruptcy Po Box 25279 Raleigh, NC 27611

State Employees Credit Union Po Box 25279 Raleigh, NC 27611

Sycrony Po Box 71750 Philadelphia, PA 19176

Sycrony Bank Po Box 71750 Philadelphia, PA 19176

Synchrony Bank Attn: Bankruptcy Pob 965064 Orlando, FL 32896

Synchrony Bank Po Box 71757 Philadelphia, PA 19176 Synchrony Bank Headquarters 200 Crossing Blvd Suite 101 Bridgewater, NJ 08807

Synchrony Bank Po Box 71737 Philadelphia, PA 19176

Synchrony Bank Po Box 71750 Philadelphia, PA 19176

Synchrony Bank Po Box 71727 Philadelphia, PA 19176

Synchrony Bank Po Box 71729 Philadelphia, PA 19176

Talbots 175 Beal St Hingham, MA 02043

Tamarack Health 11040 N State Road 77 Hayward, WI 54843

Tamarack Health Medical Center 1615 Maple lane Ashland, WI 54806

Town Bank Po Box 714 Des Plaines, IL 60018

United Wholesale Mortgage Attn: Bankruptcy P. O. Box 619098 Dallas, TX 75261

Verizon Wireless Bankruptcy Administration 500 technology Drive Suite 550 Weldon, MO 63304

Wal-Mart 702 S.W. 8th Street Bentonville, AR 72716 Walmart Credit Card PO BOX 530927 Atlanta, GA 30353

Walmart Credit Services Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Walmart Credit Services Po Box 71746 Philadelphia, PA 19176

Wells Fargo Po Box 393 Minneapolis, MN 55480

Wells Fargo Corperate office 420 Montgomery Street San Francisco, CA 94104

Wisconsin Department of Revenue Special Procedures Unit PO Box 8901 Madison, WI 53708-8901

Zales 9797 Rombauer rd Coppell, TX 75019

Zulify 2601 Elliott Avenue, Suite 200, Seattle, WA 98121